ISDH Radiological Health Section

MAMMOGRAPHY MACHINE INSPECTION

1. Facility Registration Number | | | | | | 2. Inspector Signature _____ | | | | (code)

3. Inspection Date | | | | | | | 4. Machine Identification (circle): Certified Noncertified Mixed

Last Inspection Date | | | | | | | 7. New Owner _____

5. Add this machine ☐ 6. Delete this machine ☐ _____

A. Machine Number	B.Machine Design (use Codes)	C. Location Within Facility	D. Manufacturer	E. Model and Serial Numbers	F. Means of Beam Collimation (circle one)	G. Maximum Machine Rating	H. Utilization Mode			I. Month and Year of:		
						kVp	F	M	P	MFG.	INST	INSP.
					Adj Cone Dia None Other	mA/mAs						

*-Explain on Comment Sheet

	Satisfactory	Unsatisfactory*	N/A*
8. Dedicated equipment			
9. Procedure manual			
10. Target/filter combination			
11. Anti-scatter grid capability			
12. Terminate exposures greater than 1/2 second at any time			
13. Control in shielded position			
14. Indication of x-ray production-visual at operator position			
15. Indication of x-ray termination-audible			
16. Technique factors indicated before exposure			
17. SID indicator (minimum 50 cm)			
18. Half-value layer			
19. Compression device meets requirements			
20. % misalignment of light vs. radiation field			
21. % misalignment of indicated vs. actual field size--chest wall			
22. Radiation field restricted to image receptor size			
23. Average glandular dose			
24. kVp is accurate to +/- 2 kVp and meets all other requirements			
25. Automatic exposure control is present and meets all other requirements			
26. Reproducibility--exposure			
27. Reproducibility--timer			
28. Linearity			

SDH63-058

ISDH Radiological Health Section
MAMMOGRAPHY MACHINE INSPECTION

Facility Registration Number | | | | | | Inspection Date | | | | | | Last Inspection Date | | | | | |

*-Explain on Comment Sheet

QUALITY ASSURANCE	Satisfactory	Unsatisfactory*	N/A*
29. Program in place	29.		
30. Program reviewed annually	30.		
31. Records available for 3 years	31.		
32. Processor performance evaluated prior to first patient-Daily	32.		
33. Dark room cleanliness-Daily	33.		
34. Processor performance-Daily	34.		
35. Screen cleanliness-Weekly	35.		
36. Viewbox/viewing conditions-Weekly	36.		
37. Image quality (phantom)-Monthly	37.		
38. Repeat/retake analysis-Quarterly	38.		
39. Fixer retention analysis-Quarterly	39.		
40. Dark room fog-Semi-annually	40.		
41. Screen-film contact-Semi-annually	41.		
42. Compression-Semi-annually	42.		
43. AEC density control function-Annually	43.		
44. Star pattern focal spot size-Annually	44.		
45. Uniformity of screen speed-Annually	45.		
46. Assembly physical evaluation-Annually	46.		
47. Phantom images (4 fibrils, 3 masses, and 3 speck groups)	47.		